



DEMENTIA AND ELDER ABUSE

Nirmala Dhar, LCSW

Oregon Health Authority

Older Adult Behavioral Health Coordinator

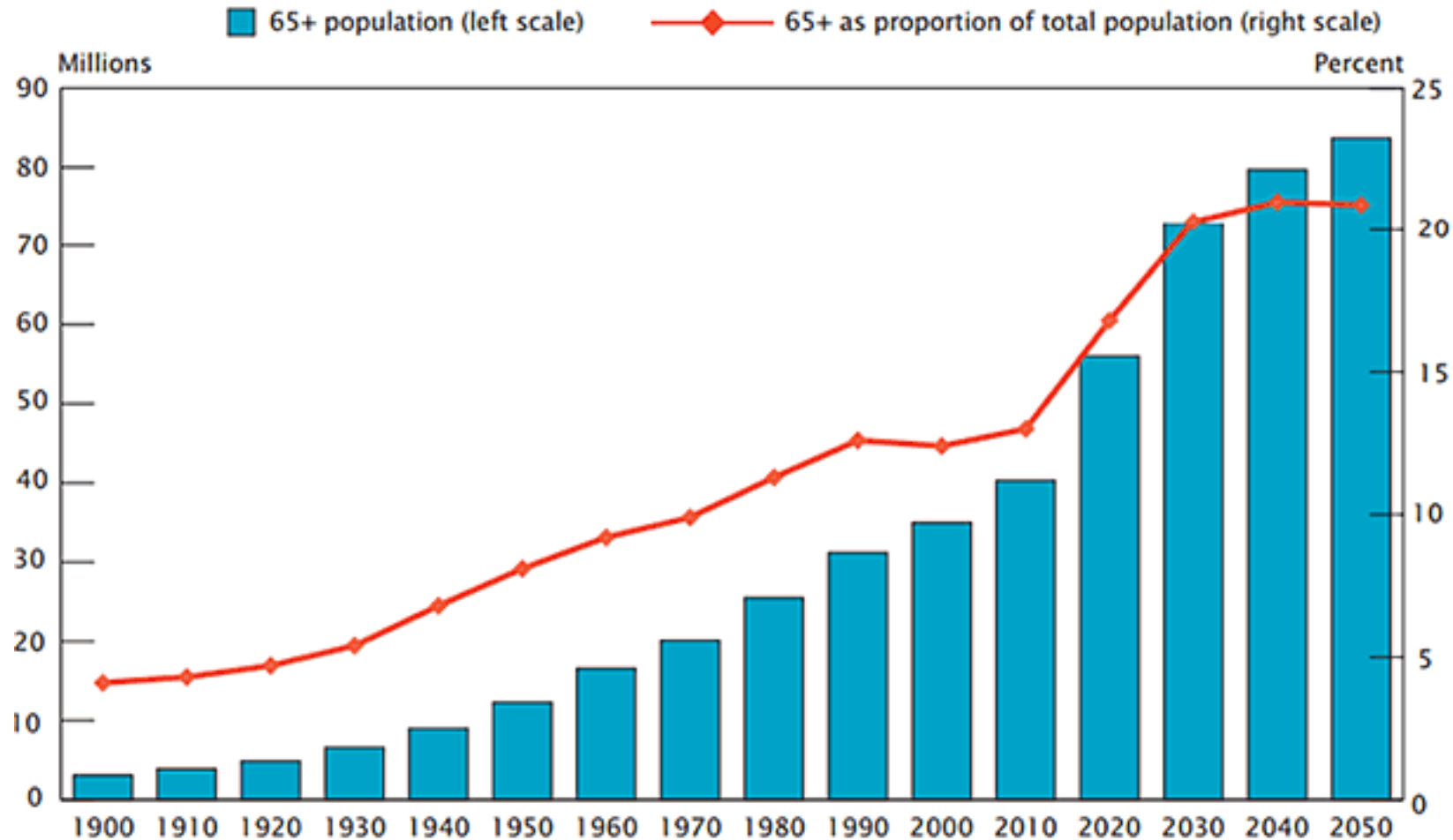




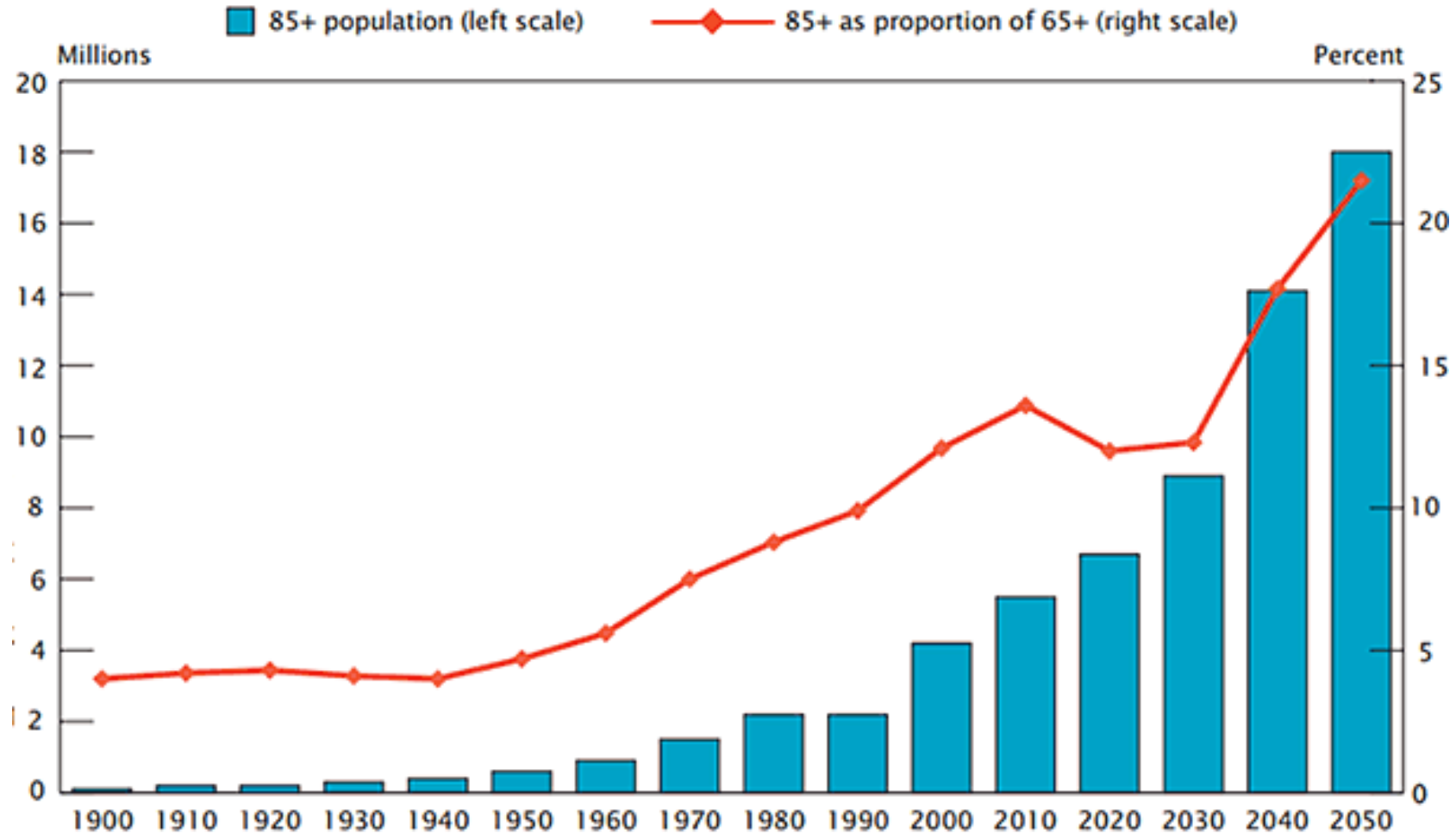
LEARNING OBJECTIVES

- PREVALENCE OF ELDER ABUSE
- DEFINITION OF ELDER ABUSE
- TYPES OF ELDER ABUSE
- DEMENTIA AS A RISK FACTOR FOR ELDER ABUSE

America's Growing Elderly Population: Aged 65 and Over: 1900 - 2050



Population Aged 85 & Over: 1900-2050



You are a frontline defender against elder abuse...



Abused seniors are **3X MORE LIKELY TO DIE** than non-abused seniors.



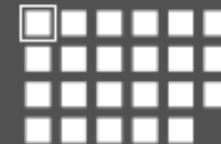
COGNITIVE DECLINE IS A RISK FACTOR FOR elder abuse, including **FINANCIAL EXPLOITATION**.



Aproximately **1 IN 10 SENIORS** is abused **EACH YEAR**.



Abused seniors are **MORE LIKELY** to be **PLACED IN NURSING HOMES** than non-abused seniors.



Elder abuse is **DRAMATICALLY UNDERREPORTED**. Only **1 IN EVERY 23 CASES** gets reported to Adult Protective Services.

PREVALENCE

- A comprehensive review of articles found elder abuse to be approximately 10%
- In a study of elder abuse by family , Laumann found verbal abuse (9%), followed by financial abuse (3.5%) and physical mistreatment (less than 1%)
- Available data form state Adult Protective Services agencies show an increasing trend in the reporting of elder abuse
- Elder abuse is also underreported.
- Elder Abuse is under-identified in the Emergency Department – 7%

What is Elder Abuse

- Elder Abuse refers to *intentional or neglectful* acts by a caregiver or “trusted” individual that lead to or may lead to harm of a vulnerable elder
- Elders who experienced abuse, even modest abuse had a 300% higher risk of death when compared to those who had been abused.

Defining Elder Abuse

- Elder abuse includes physical, sexual, psychological, verbal abuse as well as neglect, abandonment and or financial exploitation of an older person by another person or entity.
- It can occur in any setting – at home or in a facility.
- Occurs in a relationship where there is an expectation of trust or when the person is targeted due to age or disability.
- Multiple forms of elder abuse may occur at the same time.

AGING AND ELDER ABUSE

- Aging & disease factors can make it difficult to diagnose abuse and neglect
- Multiple comorbidities
- Death and disability “expected” (ageist bias)
- Many older adults are “invisible”
- Unless dementia is recognized, adults are assumed to be able to protect themselves

Types of Abuse

Physical

- The use of physical force that may result in bodily injury, physical pain or impairment. Hitting, slapping, pushing, shaking kicking, inappropriately using drugs or physical restraints, force feeding, strangulation and suffocation.

Sexual

- Non consensual sexual contact of any kind with an older adult – any form of unwanted sexual contact, includes contact with a person legally unable to give consent. Rape, sexual battery, oral copulation and sodomy, unwanted touching; sexually explicit photographing, voyeurism; digital violation.

Types of Abuse

Psychological

- The infliction of anguish, pain or distress through verbal and non verbal acts. Often a pattern of tactics to undermine the victim's confidence or create fear. Takes several forms such as isolation, threats and intimidation, insensitivity and disrespect, shaming and blaming, withdrawing affection

Financial

- The illegal or improper use of a vulnerable adult's funds, property or assets – theft of cash or valuables, transfer of deeds, withdrawal from bank accounts or use of credit cards, changing wills or title documents

Types of Abuse

Abandonment

- Desertion of an older adult by an individual who has assumed responsibility for providing care or by this person with physical custody of the adult – leaving a person who is unable to provide information at a hospital or a mall or other public place .

Neglect

- Refusal or failure to fulfill any part of a person's obligation or duties towards an elder – can include failure of fiduciary responsibilities by not paying for necessary care.

Financial Scams

- Medicare/Healthcare
- Counterfeit prescriptions
- Funeral/cemetery
- Fraudulent anti-aging products
- Telemarketing/Phone scams
- Internet Fraud
- Investment schemes
- Reverse Mortgage scams
- Sweepstakes & lottery scams
- The grandparent scam

UNDUE INFLUENCE

- When a person uses their role and power to exploit the trust, dependency and fear of others. They use their power to deceptively gain control over the decision making of the second person.
- Likened to tactics used by cults in brainwashing and perpetrators of domestic violence.
- The law recognizes the process undermining self-determination and some transactions made by a subject of undue influence may be voided.
- Difficult to detect as persons subject to it fail to recognize that it is occurring.

Abuse in Late Life Power & Control Wheel



Dynamics of Abuse in Later Life

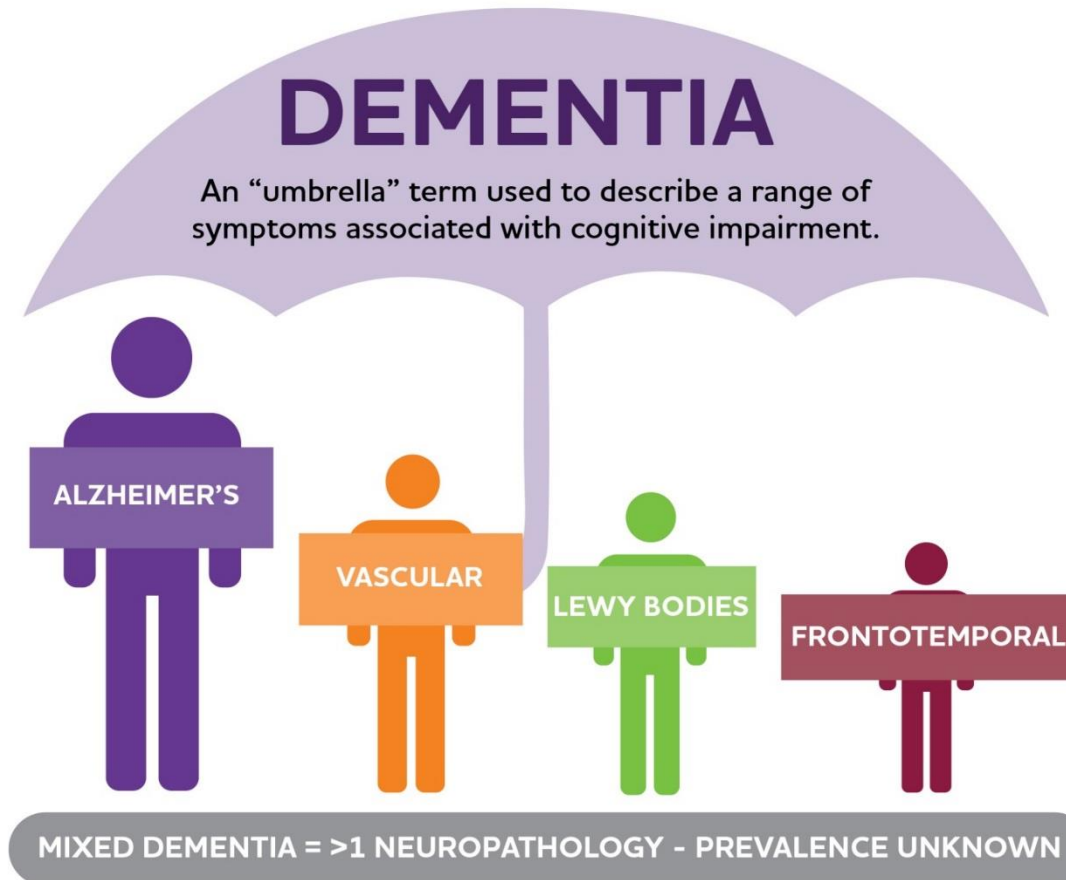
- Age: Victims are age 50 and older. Perpetrators are any age.
- Gender: Majority of victims are female especially in cases of physical and sexual abuse
- On-going relationship: spouses, partners, adult children, other family members and care givers can all be abusers.
- Power & control dynamics: older adults may experience a pattern of tactics to gain and maintain compliance such as threats, intimidation, isolation .

Dementia and Elder Abuse

Vulnerable to abuse due to:

- Memory impairment
- Communication difficulties
- Compromised judgement
- As dementia progresses so does the risk of all types of abuse

What is Alzheimer's Disease



DOMAINS OF COGNITION

COGNITION

- LEARNING & MEMORY
- LANGUAGE
- ATTENTION
- JUDGEMENT
- REASONING
- SPEED OF PROCESSING
- PERCEPTUAL-MOTOR

EXECUTIVE FUNCTION

- DECISION MAKING
- PLANNING
- WORKING MEMORY
- RESPONDING TO FEEDBACK
- INHIBITION
- MENTAL FLEXIBILITY
- TASK INITIATION
- ORGANIZATION
- SELF-REGULATION

RISK FACTORS

- Low social support
- Functional impairment
- Poor physical health
- Women more likely to be abused than men
- Lower income or poverty
- Living with large number of household members other than spouse
- Dementia

Victims are often:

- Frail
- Physically and or cognitively impaired
- Dependent on others
- Isolated
- Unable to report

What you can do

- Listen to older adults and others who may tell you about suspicions of abuse
- Do not discount an older adult's claim simply because of a cognitive impairment
- Look for elder abuse indicators and behavior changes
- Ask questions even if you do not suspect abuse to encourage disclosures

SIGNS OF PHYSICAL ABUSE AND NEGLECT

- SKIN TEAR:
 - ✓ SKIN TEARS IN SITES OTHER THAN ARMS/LEGS
 - ✓ MULTIPLE TEAR AND ABRASIONS
 - ✓ ROUGH CAREGIVER HANDLING
- FRACTURES:
 - ✓ MID-FACE, MANDIBLE AND ZYGOMATIC ARCH FRACTURES
 - ✓ SPIRAL FRACTURES
 - ✓ SITES OTHER THEN HIP, WRIST , VERTEBRA

Indicators :Potential Victims

- Confusion or delirium
- Dehydration
- Malnutrition
- Decayed teeth
- Overgrown nails
- Matted, infested hair
- Over- or under-or-medicated
- Unexplained weight loss
- Pressure ulcers

- **NCEA**

Additional Indicators

- Diarrhea, fecal impaction, urine burns
- Failure to thrive
- Clothing that is inappropriate, soiled in disrepair
- Poor hygiene (nails, skin, oral, hair)
- Inappropriate medications use (inadequate or excessive)
- Pressure ulcers
- Repeated falls
- Repeated hospitalizations

Indicators : The Environment

- Residence is poorly maintained, unsafe or unclean
- Lack of heating or cooling
- Lack of food for the elder
- Foul odors
- Infestation of vermin or insects
- Lack of assistive devices – hearing aids , glasses, dentures mobility aids

SIGNS OF ABUSE AND NEGLECT

- Bruising as a Marker of Elder Abuse
- ✓ Bruises that occur as a result of physical abuse are often large (>5cm) and on the face, lateral right arm, or posterior torso.
- ✓ Older adults with bruises should be asked about the cause of the bruises to help ascertain whether physical abuse occurred.

POTENTIAL MAKERS: The bottom line

TYPES OF INJURIES

- BRUISES
- PRESSURE SORES
- FRACTURES
- BURNS

WHAT I LOOK FOR

- LOCATION
- OLD INJURIES
- DELAY IN SEEKING CARE
- HISTORY & EXAM CONSISTENT?

Victims want the Abuse to end but....

- Maintain a relationship with or protect the abuser because:
- Fear (of retaliation, death, facility placement)
- Love/care about the abuser (especially an adult child)
- Economic reasons
- Health concerns

Consider asking these questions:

- Is anyone hurting you or scaring you?
- How are decisions about your life made?
- How often do you see your family and friends?
- Who makes decisions about your finances?
- Are you afraid? Are there things your (son, spouse, etc.) does that make you fearful?
- Can you safely disagree with your (abuser)?
- Ask privately, in an area where you will not be overheard

ADDITONAL QUESTIONS

- DOES ANYONE THREATEN, HURT OR ABUSE YOU?
- DO YOU FEEL SAFE WHERE YOU LIVE?
- DO YOU FEEL PUT DOWN, MADE FUN OR RIDICULED BY YOUR CAREGIVER?
- ARE YOU AFRAID OF ANYONE?
- DO YOU FEEL YOUR CAREGIVER KEEPS YOU FROM DOING WHAT YOU WANT?
- ARE YOU MADE TO STAY IN YOUR ROOM OR LEFT ALONE?

FOLLOW UP OF A YES ANSWER

✓ GIVE PERMISSION

- Validate the experience and name it
- Identify abuse as a problem
- Affirm elder's right to safety

✓ PROVIDE INFORMATION

- Educate about dynamics of abuse
- Identify and refer to community resources

✓ ESTABLISH A FOLLOW UP PROCESS

SELF NEGLECT

- An adult's inability due to physical or mental impairment or diminished capacity to perform essential self-care tasks:
- Obtaining essential food, clothing and medical care
- Obtaining goods and services necessary to maintain health and safety
- Managing one's own financial affairs

Significance of Self-Neglect

- Most common referral to APS
- Risk factor for premature death
- May co-occur with other forms of elder abuse

Indicators of self-neglect

- Displaying mental confusion, depression, paranoia
- Appearing malnourished, dehydrated
- Refusing or failing to seek needed medical care or to take prescribed medications
- Failing to attend to personal hygiene
- Wearing clothing that is dirty or unsuitable for conditions
- Being homeless

WHO ARE THE PERPRETATORS

- Most likely to be adult children or spouses
- More likely to be male
- History of substance abuse, mental health issues, trouble with police, unemployed, financial stress
- In long term care settings according to National Ombudsman Reporting System in 2014 7.6% of all complaints (14,000) involved abuse, gross neglect or exploitation.

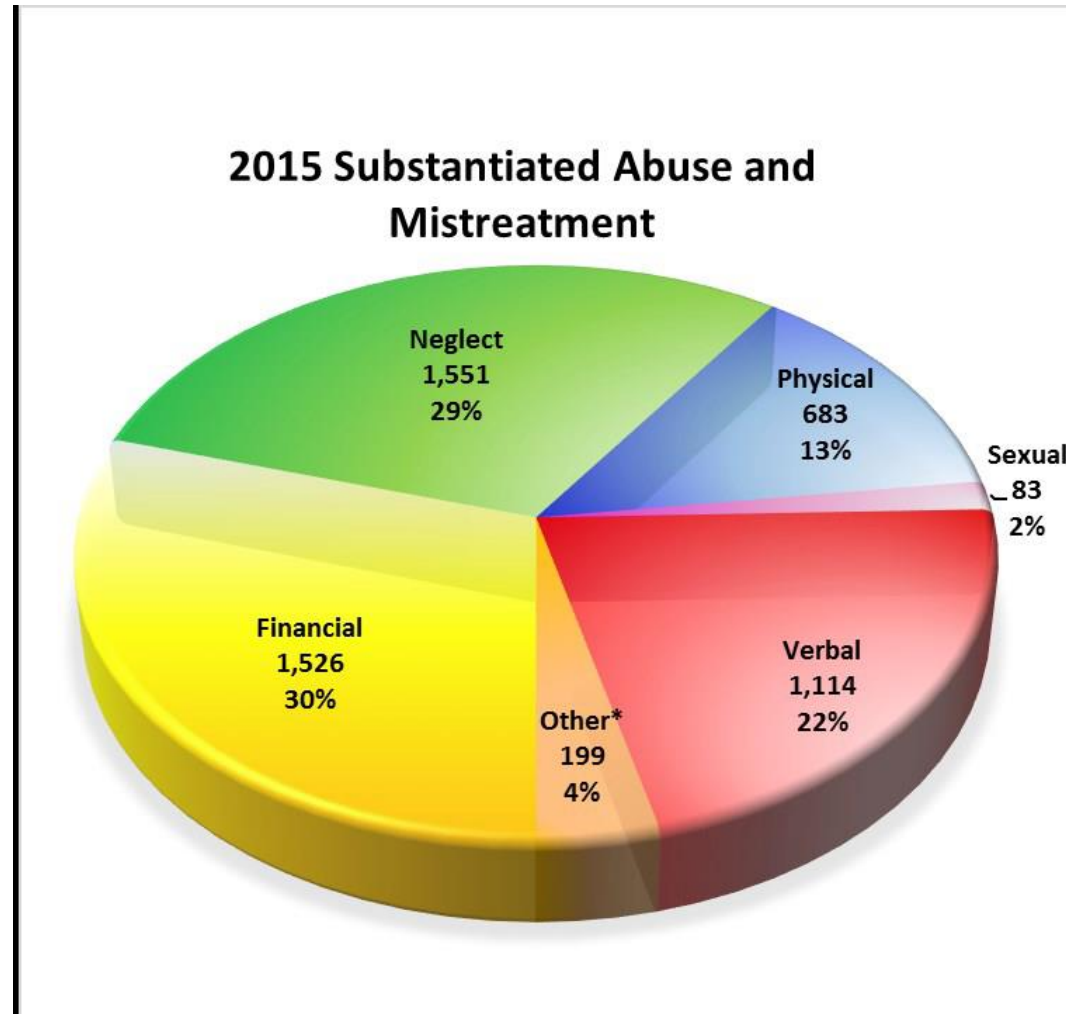
CHALLENGES

- Adults have a right to make their own decisions until a court finds evidence to the contrary.
- Determining if a person who self-neglects has the mental capacity to make decisions for themselves, including decisions which may endanger their health or safety, can be difficult.
- Capacity can fluctuate and be difficult to assess.
- Finding trained evaluators (e.g., psychologists who work with the elderly) can be challenging.

OAAPI – ANNUAL REPORT OREGON 2015

- Of the nearly 43,000 reports in 2015, there were 19,041 investigations conducted. Reports that did not meet the abuse definition were referred to community agencies and local organizations for follow up. Of those reports investigated, 4,215 people were determined to have been abused.
- As in both 2013 and 2014, financial exploitation (30%) and neglect (29%) continue to be the most prevalent forms of substantiated abuse.

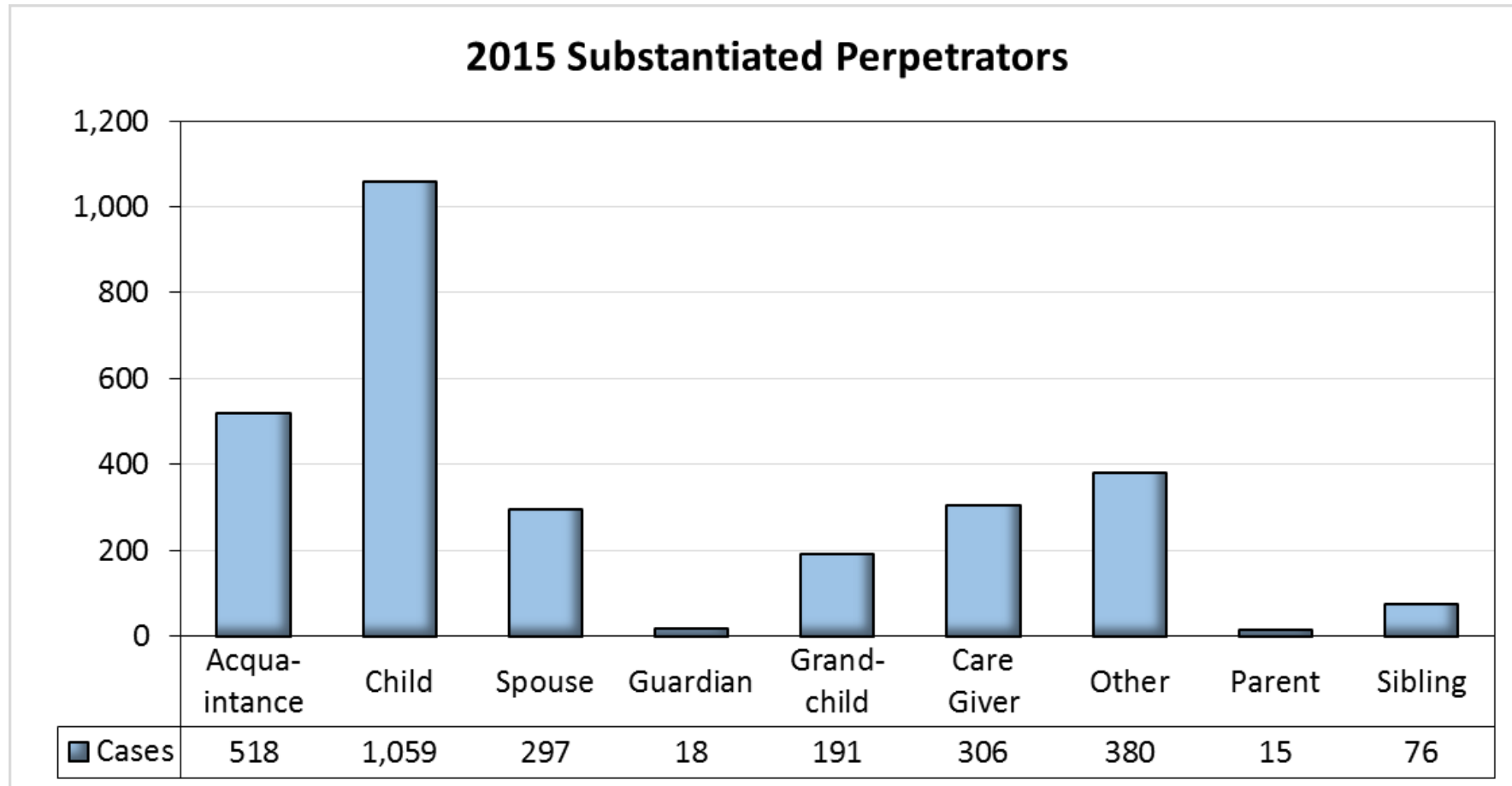
Substantiated Abuse by Type: Oregon 2015



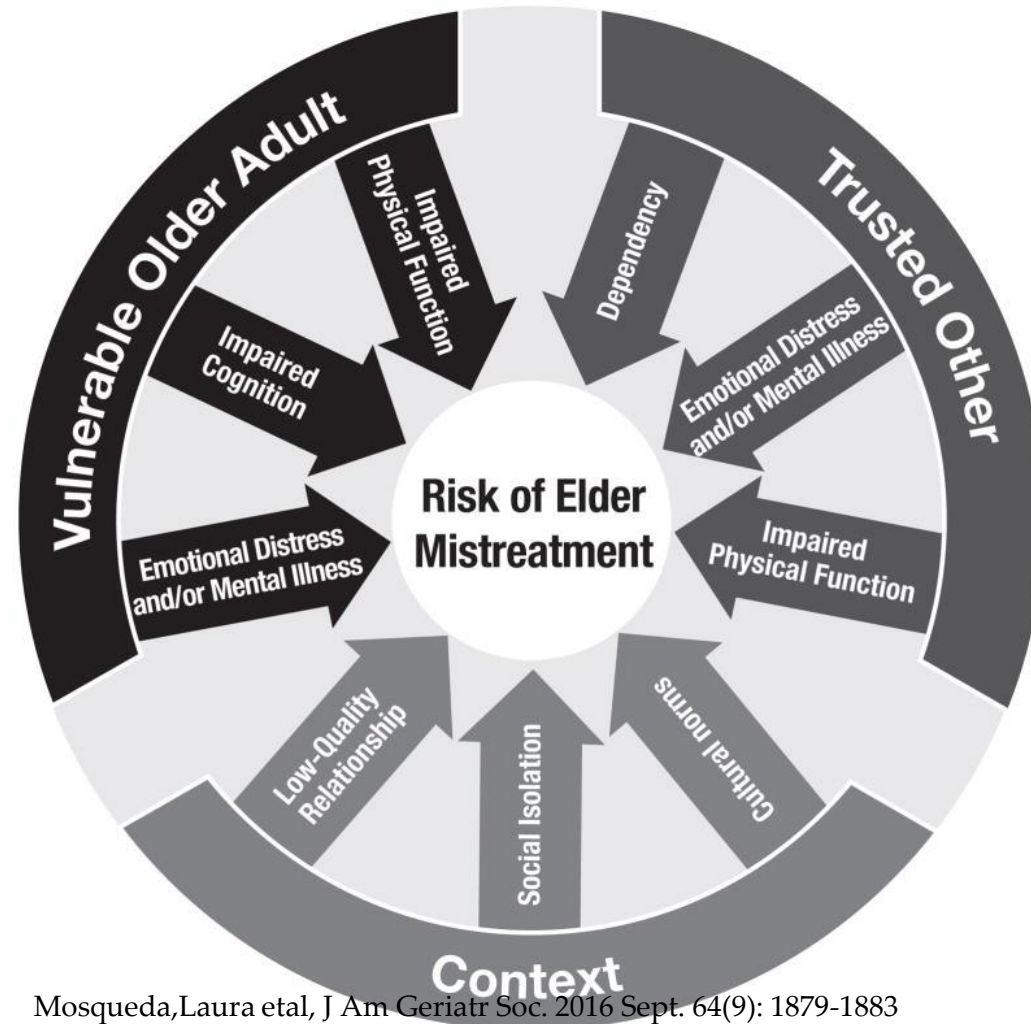
Financial Abuse : Oregon 2015

- Financial exploitation remains the largest portion of both reported and substantiated abuse
- 37% of victims are male. Males are more likely to be victims of financial exploitation than any other type of abuse that APS investigates
- 46% were abused by a family member
- Average dollar amount lost by the victim is \$24,915. However money is not all that is taken – personal property, real estate, vehicles, medication, food stamps. Estimated cost to Medicaid and other government funded programs in a single year is \$2 million

Substantiated perpetrators in Oregon



ABUSE INTERVENTION MODEL (AIM)



AIM Model Domains

- Vulnerable Older Adult - financial, physical or emotional dependence on others or impaired capacity for self care or self protection. This includes impaired physical function, impaired cognition and emotional distress/mental illness (depression, personality traits such as narcissism) may make caregiving difficult.
- Trusted Other – includes a variety of people such as family members, neighbors, paid caregivers financial advisors.
- Context – can either mitigate or exacerbate elder mistreatment include social isolation, low quality relationships, cultural norms (e.g. some cultures may view an illness such as Alzheimer's as shameful and embarrassing and may wish to isolate the elder thus increasing risk for mistreatment)



THINGS TO CONSIDER

- Mobility and Functional Status
- Health Conditions
- Environment
- Caregiver capability and limitations
- Implausible explanations

INTERVENTION STRATEGIES

- Always screen to assess for elder abuse
- Strive to develop a trusting relationship with the older adult as well as the caregiver. Meet with each one individually.
- Educate victims on patterns of abuse and that it tends to worsen in severity over time.
- Provide older adults with emergency contact numbers and community resources.
- Referral to appropriate regulatory agencies.
- Develop policies and guidelines for responding to elder abuse.

Mandatory Reporters Oregon

- State law mandates that workers in certain professions must make reports if they have reasonable cause to suspect abuse and neglect
- List of officials who are mandatory reports please refer to ORS 419B.005 (3)
- Social Workers are mandatory reporters!
- You can call 1-855-503-SAFE (7233) - toll free to report abuse or neglect of any child or adult in Oregon.
- ARE YOU A MANDATORY REPORTER??

SUMMARY: FACTS

- ELDER ABUSE:
- A reality in our society
- Increasing prevalence
- Present in all demographics
- Most is unrecognized by clinicians
- Can be addressed effectively through collaborative, coordinated community response and resources.

GOALS

- ELDER ABUSE MUST BECOME A CULTURAL TABOO
- ELDER ABUSE IS A VIOLATION OF HUMAN RIGHTS!
- ZERO TOLERANCE OF ELDER ABUSE

Since 2006 – to raise visibility of elder
abuse and promoting resources &
services



What You Can Do : Take a STAND Against Elder Abuse

- LEARN THE INDICATORS OF ELDER ABUSE , NEGLECT AND EXPLOITATION
- WATCH OUT FOR OLDER ADULTS IN YOUR LIFE (pay attention to changes in their behavior, living arrangement, physical conditions, spending habits and who they socialize with)
- REPORT SUSPECTED ABUSE TO LAW ENFORCEMENT AND APS
- LEARN MORE ABOUT THE WORK BEING DONE IN YOUR COMMUNITY TO ADDRESS ELDER ABUSE
- PROMOTE RAISING PUBLIC AWARENESS ABOUT ELDER ABUSE

THANK YOU!

- NIRMALA DHAR
- NIRMALA.DHAR@STATE.OR.US
- 503 945 9715
- <https://www.youtube.com/watch?v=-eaJXBj87to> An Age for Justice:
Confronting Elder Abuse in America
- <https://www.youtube.com/watch?v=QAsk6g9OHvQ> What is Elder
Abuse: How and Why it's Occuring

RESOURCES

- <http://www.centeronelderabuse.org/index.asp> (Center for Excellence on Elder Abuse & Neglect – University of California, Irvine)
- <https://ncea.acl.gov/> (National Center on Elder Abuse)
- http://www.frameworksinstitute.org/toolkits/aging/elements/items/aging_reframe_cards.pdf
- <https://consultgeri.org/geriatric-topics/elder-mistreatment-and-abuse>
- Abuse in later Life: Power & Control Dynamics and a Victim-Centered Response – Deb Spangler & Bonnie Brandl
<http://www.ncall.us//FileStream.aspx?FileID=35>

RESOURCES

